

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED
CENTRAL FAX CENTER

APR 23 2007

In Re Patent Application of:)
T. Kameda et al.)
For: COUPLING CONDITION DETECTING)
DEVICE FOR SLIDE FASTENER)
ELEMENT ROWS)
Serial No.: 10/828,733)
Filed: April 21, 2004)
Examiner: John C. Hong)
Art Unit: 3726)
Conf. No.: 4772)
Atty. Dkt. No.: 114208-024)

CERTIFICATE OF TRANSMISSION BY FACSIMILE

VIA FACSIMILE TO (571) 273-8300
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

I hereby certify that the following documents are being facsimile transmitted to the
United States Patent and Trademark Office (Fax No. 571-273-8300) on April 23, 2007.


1. Amendment Transmittal (1 pg.);
2. Response to Office Action (3 pgs.);
3. Abstract (1 pg.).


Respectfully submitted,

EVEREST INTELLECTUAL PROPERTY LAW GROUP

Date: April 23, 2007

BY


Michael S. Leonard, Reg. No. 37,557
P.O. Box 708
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Phone: (847) 272-3400

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 114208-024	
Applicant(s): T. Kameda et al.					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/828,733	April 21, 2004	John C. Hong	43793	3726	4772
Invention: COUPLING CONDITION DETECTION DEVICE FOR SLIDE FASTENER ELEMENT ROWS					
<u>COMMISSIONER FOR PATENTS:</u>				RECEIVED CENTRAL FAX CENTER	
Transmitted herewith is an amendment in the above-identified application.				APR 23 2007	
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-3189 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: April 23, 2007		
Michael S. Leonard, Reg. No. 37, 557 Everest Intellectual Property Law Group P.O. Box 708 Northbrook, IL 60065 Phone: 847-272-3400 Fax: 847-272-3417			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					

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Office Fax No. (571) 273-8300 on April 23, 2007
Michael S. LeonardRESPONSE TO OFFICE ACTIONMail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Response is submitted in response to the Office Action mailed March 26, 2007.

Applicants request amendment, reconsideration and allowance of the patent application.

Applicants invite the Examiner to call Applicants' Representative to discuss any issues
with this application.

Amendments to the Specification begins on page 2 of this Response.

Remarks begin on page 3 of this Response.